PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

3/77/346

CLAIMS AS FILED - PART I							5	SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR		SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUME	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		•		ll	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =				l	X40=		OR.	X80=		
М	JLTIPLE DEPE	NDENT CLAIM P					+135=		OR	+270=			
* If the difference in column 1 is less than zero, en					r "0" in d	column 2	L	TOTAL	355	OR	TOTAL		
CLAIMS AS AMENDED - PART I										•	OTHER	THAN	
_		(Column 1)		olumn 2) (Column 3)			SMALL ENTITY			SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total		Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	• NITATION OF M	Minus			=	ļΓ	X40=		OR	X80=		
┕	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=		
								TOTAL		OR	TOTAL		
ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)											AUUII. FEE	·	
В		CLAIMS REMAINING	STATE	HIGH	IEST		1 г		ADDI-	1		ADDI-	
AMENDMENT	7.4	AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	·	Minus	**		=	П	X\$ 9=		OR	X\$18=		
	Independent	NTATION OF MI	Minus	***	CLAIM	=	ŀΓ	X40=		OR	X80=		
_	THOTTHEOL	INTATION OF IM	JETH EE DET	CNDCIVI	CLAIM		۱ [+135=		OR	+270=		
								TOTAL		OR	TOTAL ADDIT, FEE		
ADDIT. FEE (Column 1) (Column 2) (Column 3)													
AMENDMENT C	2 / G	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA	lΓ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	ΙГ	X\$ 9=		OR	X\$18=		
	Independent	ļ	Minus	***		=	巾	X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						۱ 		-	Un			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
	The "Highest Num	nber Previously Pai	d For" (Total or	Independe	ent) is the	highest number	r foun	d in the app	ropriate box	in coli	umn 1.		